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PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
AMENDMENT TRANSMITTAL LETTER**

*I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 3, 2006.*

Sheila R. Slater

Applicant : Jason R. Babcock, et al. Confirmation No. 7195  
Application No. : 10/634,640  
Filed : August 5, 2003  
Title : DECOMPOSITION OF ORGANIC AZIDES  
  
Grp./Div. : 1714  
Examiner : Cephia D. Toomer  
  
Docket No. : 50883/U339

Commissioner for Patents Post Office Box 7068  
P.O. Box 1450 Pasadena, CA 91109-7068  
Alexandria, VA 22313-1450 March 3, 2006

Commissioner:

Enclosed is an amendment to the above-identified application.

| CLAIMS AS AMENDED   |                                  |                         |                     |                   |                   |     |
|---|----------------------------------|-------------------------|---------------------|-------------------|-------------------|-----|
|   | Claims Remaining After Amendment | Highest Number Paid For | Number Extra Claims | Small Entity Rate | Large Entity Rate | FEE |
| Total Claims Fee  | 32                               | *33                     |                     | x \$25.00         | x \$50.00         |     |
| Independent Claims  | 2                                | ** 3                    |                     | x \$100.00        | x \$200.00        |     |
| Multiple Dependent Claims ***   |                                  |                         |                     | \$180.00          | \$360.00          |     |
| TOTAL FILING FEE  |                                  |                         |                     |                   |                   |     |
| NO ADDITIONAL FEE REQUIRED  | IF NO FEE REQUIRED, INSERT "0"   |                         |                     |                   |                   |     |
| LIST INDEPENDENT CLAIMS:  |                                  |                         |                     |                   |                   |     |
| * IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3     |                                  |                         |                     |                   |                   |     |
| ** IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3      |                                  |                         |                     |                   |                   |     |
| *** PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST TIME |                                  |                         |                     |                   |                   |     |

**Amendment Transmittal Letter**  
**Application No. 10/634,640**

X

Attached is our check for \$ to pay the fees calculated above.

X

A Petition for Extension of Time and the required fee are enclosed.

Other enclosures: (1) Information Disclosure Statement with List of Cited References and \$180 fee; (2) Exhibits

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. A copy of this letter is enclosed.

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By

  
John D. Carpenter  
Reg. No. 34,133  
626/795-9900

JDC/srh

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